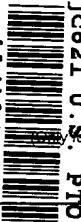
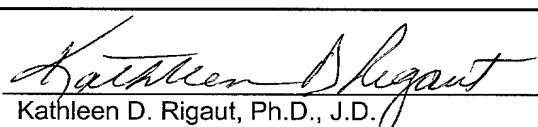


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|  UTILITY PATENT APPLICATION TRANSMITTAL <small>(for new nonprovisional applications under 37 CFR 1.53(b))</small> | Attorney Docket No. | | EricPotter | Total Pages | 37 |
| | First Named Inventor or Application Identifier | | | | |
| | Roland Carlsson | | | | |
| | Title: A METHOD FOR IN VITRO MOLECULAR EVOLUTION OF PROTEIN FUNCTION | | | | |
| Express Mail Label No. | | EL182473444US | | Date Mailed December 12, 2000 | |
| APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i> | | | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> | | | 6. <input type="checkbox"/> Microfiche Computer Program (Appendix) | | |
| 2. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure | | | 7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy <i>(identical to computer copy)</i> c. <input type="checkbox"/> Statement verifying identity of above copies | | |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets (5)) | | | ACCOMPANYING APPLICATION PARTS | | |
| 4. <input type="checkbox"/> Oath or Declaration (Total Pages ()) | | | 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | | |
| | | | 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) | | |
| | | | 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> | | |
| | | | 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations | | |
| | | | 12. <input type="checkbox"/> Preliminary Amendment | | |
| | | | 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> | | |
| | | | 14. <input checked="" type="checkbox"/> Applicant Claims Small Entity Status | | |
| | | | 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> | | |
| | | | 16. <input type="checkbox"/> Other: _____ | | |
| 17. a. If a CONTINUING APPLICATION , check appropriate box and supply requisite information. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of the following application(s), each of which is hereby incorporated herein by reference: b. Priority Applications In addition to any applications listed in 17a, the present application also claims priority to the following application(s), each of which is hereby incorporated herein by reference. | | | | | |
| 18. CORRESPONDENCE ADDRESS | | | | | |
| <input checked="" type="checkbox"/> Customer Number 000110 or DANN, DORFMAN, HERRELL AND SKILLMAN, P.C. 1601 Market Street, Suite 720 Philadelphia, PA 19103-2307 Phone (215) 563-4100 Facsimile (215) 563-4044 to the attention of the individual identified below. | | | | | |
|  Kathleen D. Rigaut, Ph.D., J.D. PTO Registration No. 43,047 | | | | | |

FEE TRANSMITTAL

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|--|--|---|
| | | <i>Complete if known</i> |
| | | Application Number Not yet assigned |
| | | Filing Date December 12, 2000 |
| | | First Named Inventor Roland Carlsson |
| | | Group Art Unit |
| | | Examiner Name |
| TOT. AMT. OF PAYMENT: (1)+(2)+(3) = \$ <u>355.00</u> | | Attorney Docket Number Eric Potter |

| METHOD OF PAYMENT (check one) | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------|--|----------|--------------------|---------------|-----------------------------------|-------|--|-------|---------------------------|-------|--|-------|--|-------|--|-------|---|----------|--|-------|---|-------|--|-------|---|-------|--|----------|---------------------------------|-------|---|-------|--|-------|--|-------|-----------|-------|-------------------------------|-------|---|-------|---|-------|---|-------|---|-------|--|-------|--|-------|---------------------------|-------|
| 1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments | | 3 ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30%;">Fee Description</td><td style="width: 70%;">Fee Paid</td></tr> <tr><td>SurchARGE-late filing fee or oath</td><td>_____</td></tr> <tr><td>SurchARGE - late provisional filing fee or cover sheet</td><td>_____</td></tr> <tr><td>Non-English specification</td><td>_____</td></tr> <tr><td>For filing a request for reexamination</td><td>_____</td></tr> <tr><td>Requesting publication of SIR prior to Examiner action</td><td>_____</td></tr> <tr><td>Requesting publication of SIR after Examiner action</td><td>_____</td></tr> <tr><td>Extension for response within first month</td><td>_____</td></tr> <tr><td>Extension for response within second month</td><td>_____</td></tr> <tr><td>Extension for response within third month</td><td>_____</td></tr> <tr><td>Extension for response within fourth month</td><td>_____</td></tr> <tr><td>Notice of Appeal</td><td>_____</td></tr> <tr><td>Filing a brief in support of an appeal</td><td>_____</td></tr> <tr><td>Request for oral hearing</td><td>_____</td></tr> <tr><td>Petition to institute a public use proceeding</td><td>_____</td></tr> <tr><td>Petition to revive unavoidably abandoned application</td><td>_____</td></tr> <tr><td>Petition to revive unintentionally abandoned application</td><td>_____</td></tr> <tr><td>Issue fee</td><td>_____</td></tr> <tr><td>Petitions to the Commissioner</td><td>_____</td></tr> <tr><td>Petitions related to provisional applications</td><td>_____</td></tr> <tr><td>Submission of Information Disclosure Stmt</td><td>_____</td></tr> <tr><td>Recording each patent assignment per property (times number of properties)</td><td>_____</td></tr> <tr><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td>_____</td></tr> <tr><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td>_____</td></tr> <tr><td>Other fee (specify) <u>Advance Order (10 copies)</u></td><td>_____</td></tr> <tr><td>Other fee (specify) _____</td><td>_____</td></tr> </table> | | Fee Description | Fee Paid | SurchARGE-late filing fee or oath | _____ | SurchARGE - late provisional filing fee or cover sheet | _____ | Non-English specification | _____ | For filing a request for reexamination | _____ | Requesting publication of SIR prior to Examiner action | _____ | Requesting publication of SIR after Examiner action | _____ | Extension for response within first month | _____ | Extension for response within second month | _____ | Extension for response within third month | _____ | Extension for response within fourth month | _____ | Notice of Appeal | _____ | Filing a brief in support of an appeal | _____ | Request for oral hearing | _____ | Petition to institute a public use proceeding | _____ | Petition to revive unavoidably abandoned application | _____ | Petition to revive unintentionally abandoned application | _____ | Issue fee | _____ | Petitions to the Commissioner | _____ | Petitions related to provisional applications | _____ | Submission of Information Disclosure Stmt | _____ | Recording each patent assignment per property (times number of properties) | _____ | Filing a submission after final rejection (37 CFR 1.129(a)) | _____ | For each additional invention to be examined (37 CFR 1.129(b)) | _____ | Other fee (specify) <u>Advance Order (10 copies)</u> | _____ | Other fee (specify) _____ | _____ |
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| Non-English specification | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For filing a request for reexamination | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Requesting publication of SIR prior to Examiner action | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Requesting publication of SIR after Examiner action | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within first month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within second month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within third month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extension for response within fourth month | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Notice of Appeal | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing a brief in support of an appeal | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Request for oral hearing | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petition to institute a public use proceeding | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petition to revive unavoidably abandoned application | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Petitions to the Commissioner | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Petitions related to provisional applications | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Submission of Information Disclosure Stmt | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Recording each patent assignment per property (times number of properties) | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing a submission after final rejection (37 CFR 1.129(a)) | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For each additional invention to be examined (37 CFR 1.129(b)) | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) <u>Advance Order (10 copies)</u> | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FILING FEE <table style="width: 100%; border-collapse: collapse;"> <thead> <tr><th style="width: 30%;">Fee Description</th><th style="width: 70%;">Fee Paid</th></tr> </thead> <tbody> <tr><td>Utility filing fee</td><td><u>355.00</u></td></tr> <tr><td>Design filing fee</td><td>_____</td></tr> <tr><td>Plant filing fee</td><td>_____</td></tr> <tr><td>Reissue filing fee</td><td>_____</td></tr> <tr><td>Provisional filing fee</td><td>_____</td></tr> <tr><td colspan="2" style="text-align: right;">SUBTOTAL (1) \$ <u>355.00</u></td></tr> </tbody> </table> | | Fee Description | Fee Paid | Utility filing fee | <u>355.00</u> | Design filing fee | _____ | Plant filing fee | _____ | Reissue filing fee | _____ | Provisional filing fee | _____ | SUBTOTAL (1) \$ <u>355.00</u> | | CLAINS <table style="width: 100%; border-collapse: collapse;"> <thead> <tr><th style="width: 30%;">Extra Fee</th><th style="width: 70%;">Fee Paid</th></tr> </thead> <tbody> <tr><td>Total Claims</td><td></td></tr> <tr><td>Presented <u>6</u> - <u>20</u> = <u>0</u> x <u>9.00</u> = <u>0</u> (a)</td><td></td></tr> <tr><td>Independent Claims</td><td></td></tr> <tr><td>Presented <u>1</u> - <u>3</u> = <u>0</u> x <u>39.00</u> = <u>0</u> (b)</td><td></td></tr> <tr><td>Multiple Dependent Claim (first presentation)</td><td><u>0</u></td></tr> <tr><td colspan="2" style="text-align: right;">SUBTOTAL (2) \$ <u>0</u></td></tr> </tbody> </table> | | Extra Fee | Fee Paid | Total Claims | | Presented <u>6</u> - <u>20</u> = <u>0</u> x <u>9.00</u> = <u>0</u> (a) | | Independent Claims | | Presented <u>1</u> - <u>3</u> = <u>0</u> x <u>39.00</u> = <u>0</u> (b) | | Multiple Dependent Claim (first presentation) | <u>0</u> | SUBTOTAL (2) \$ <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Utility filing fee | <u>355.00</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Design filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plant filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reissue filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Provisional filing fee | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) \$ <u>355.00</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Independent Claims | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Multiple Dependent Claim (first presentation) | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| (a) Enter 20 or number previously paid for (b) Enter 3 or number previously paid for | | SUBTOTAL (3) \$ <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Submitted By:

Typed or

Printed Name Kathleen D. Rigaut, Ph.D., J.D. Reg. Number 43,047

Signature Kathleen D. Rigaut

Date December 12, 2000

Deposit Account User ID
04-1406